MISSION PEAK UNITARIAN UNIVERSALIST CONGREGATION P.O. Box 545 Fremont, CA 94537-0545

DONATED RESOURCES FORM – RECEIPT REQUEST

Please Print.		
Today's Date:		
Your Name:		
Address:		
City, State, Zip:		
Phone:		
and/or groups, reattached receipts these items.	as for use at Mission Peak Unitarian Universalist Coeceiving nothing in return. By submitting this forms, I request a receipt from Mission Peak documenting the submitting this form the submitted submitted in the submitted submitted in the submitted submitt	and corresponding
<u>ITEM</u>	Brief Explanation – Purpose	\$\$ Value
Please attach all church office.	receipts and return to the Treasurer or the Treasure	er's folder in the
Office use: D	Date processed and sent:	